

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10/757900
APPLICANT(S)

FILED DATE

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS						
	IND	DEP	IND	DEP	IND	DEP		IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.	1	1	3	1									
TOTAL DEP.	17	22	22	1									
TOTAL CLAIMS	18	25	25	2									